

Mental Healthcare Report

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Center for Mental Healthcare and Outcomes Research

A VA HSR&D
Center of Excellence

Central Arkansas Veterans Healthcare System

- Richard R. Owen, MD
Director
- Marisue Cody, PhD, RN
Associate Director

Purpose and Mission:

Since being funded in 1990, the Center has strived to improve access to care, quality of care, and outcomes of care for veterans with prevalent and serious mental disorders. The mission of the Center is to develop, implement and disseminate clinically relevant health services research to improve the mental health and care of veterans within the VA and nationwide.

Core Investigators:

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Brenda M. Booth, PhD
Marisue Cody, PhD, RN
Geoffrey M. Curran, PhD
Ellen P. Fischer, PhD
John C. Fortney, PhD
Teresa J. Hudson, PharmD
JoAnn Kirchner, MD
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From the Director, Richard R. Owen, MD

Issue highlights CeMHOR research and training

CeMHOR's tradition of excellence is reflected in the research of our investigators who focus on developing methods to assess and improve quality and outcomes of mental health care. We take great pride in what we do and its po-



tential impact on veterans and their quality of life.

The VA gives research on dementia, depressive disorders, schizophrenia and substance abuse—which researchers here are studying—a high priority because of their prevalence in VA treatment settings and their devastating impact on quality of life. At CeMHOR we are aware that the bottom line of all our efforts is improving treatment outcomes and—as a result—quality of life for veterans.

Our stated mission is to improve mental health care for veterans. The CeMHOR Strategic Plan for 2000-2004 builds on the Center's work since it opened in 1990, and reflects a transition in our work from the development of

assessment methods to the implementation of innovative interventions.

Three of the plan's four goals focus on research initiatives. Without doubt, these goals are important as we examine variations in service delivery in order to identify best practices, develop and test interventions to improve routine practice, and then seek the most effective way to translate these for use in real-world settings in the VA clinics and inpatient units.

However, it is the fourth goal of our strategic plan that I want to comment on in this space: increasing capacity in the mental health services research field through training, recruitment and collaboration.

CeMHOR continues a successful tradition of training and mentoring researchers early in their careers and collaborating with established researchers across the country. This newsletter issue highlights the work and careers of two CeMHOR researchers: JoAnn Kirchner, MD, Core Investigator, and Carla Gene Rapp, PhD, RN, post-doctoral fellow.

(continued on back page)

New CeMHOR web page: under construction

Newsletter Editor Yvonne McLaughlin resigned recently to move to St. Louis after receiving a master's degree in technical and expository writing from the University of Arkansas at Little Rock.

Before leaving, Yvonne's last challenge was designing a web page for CeMHOR.

Keep watching the newsletter for an announcement about the web page

address when the new web site is accessible.

"We will certainly miss Yvonne and the talents she brought to our team," says Marisue Cody, PhD, RN, CeMHOR Associate Director.



"She not only edited the newsletter but also

gladly undertook the job of getting us on the web and making information about us and our researchers more accessible."

Working on the web site has consumed most of her time since early spring, Yvonne says. "I was interested in web site development and asked if it were possible for us to have a web site. I thought it was

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Recipient of Advanced Research Career Development Award focuses research on depression and alcohol

Alcohol disorders and depression: They occur often in a primary care setting; they are associated with increased health care costs, yet treatment for them can be provided effectively in a primary care clinic.

These two types of disorders are the focus of research by JoAnn Kirchner, MD, a core investigator with CeMHOR.

Dr. Kirchner believes it's possible to detect, diagnose and successfully treat—in VA primary care outpatient clinics—a large segment of the veteran population diagnosed with depressive and alcohol disorders.

Earlier this year Dr. Kirchner received a VA Advanced Research Career Development Award for Mental Health Services Research, allowing her to continue studying these disorders in VA primary care settings.

Research keeps with VA priorities

"My research on integrating primary and mental health care is in keeping with the overall mission and priorities of the Veterans Health Administration and the VA in general," Dr. Kirchner said. "Depression is one of the top 10 primary diagnoses affecting patients who receive outpatient care from the VA."

Dr. Kirchner currently mixes research with clinical practice as she sees patients one day a week in the mental health clinic at the Eugene J. Towbin Healthcare Center in North Little Rock.

Since alcohol and depressive disorders often present with similar symptoms, Dr. Kirchner said there is a good possibility the conditions might be misdiagnosed in a busy outpatient clinic.

"We know that in substance use treatment populations, as many as 80% of those patients who come in with alcohol-related problems or symptoms might fit the criteria for a depressive episode," she



said. "After about three weeks of sobriety, that figure drops to 5-6%."

Dr. Kirchner's research plans under her new award include expanding her focus on these disorders to assess the quality and effectiveness of community-based mental health care for alcohol and depression.

"There is much evidence to suggest these disorders can be treated effectively by mental health specialists and that many patients, particularly elderly people, prefer to receive treatment from their primary care provider."

Dr. Kirchner doesn't advocate putting a psychiatrist in every VA community-based outpatient clinic (CBOC) to provide this specialty mental health care. Rather, a mid-level provider, such as an advanced practice nurse with prescribing privileges, could manage uncomplicated cases, she said.

Dr. Kirchner is Principal Investigator for a project evaluating an intervention to provide mental health and substance use services in CBOCs. It is part of a multisite collaborative study sponsored by the VA & the Substance Abuse and Mental Health

Services Administration.

As many as one-half of the CBOCs are located in rural areas where access to specialty care is a problem. "This, coupled with the stigma associated with receiving specialized care, inhibits many people from getting the care they need," she said.

One of Dr. Kirchner's next projects involves documenting "how we currently provide mental health and substance abuse services in both the community-based outpatient clinics and the VA medical center-based primary care clinics."

She added, "These clinics use a variety of models to integrate mental health services. However, the presence of mental health staff in those clinics varies a great deal. It's possible that each model could be effective and efficient in some settings, but we need more research to determine which approach is most effective in specific settings so that patients receive the right care, at the right time, and in the right place."

Brief interventions

Brief interventions for alcohol-related disorders, administered in a primary care setting, can be effective, Dr. Kirchner said, citing a study by Fleming and collaborators.

"I felt this study was important clinically and serves as a starting point for further research," she said.

Brief interventions for alcohol disorders allow a primary care provider to help the patient arrive at options to reduce his or her alcohol use.

"Maybe they won't stop drinking completely," Dr. Kirchner said, "but they might be willing to contract with me to cut down, say from a 6-pack to 3 or 4 beers a day. It's possible to be empathetic and nonjudgmental while still pointing out how this is impacting their physical health—how it is a life-threatening disorder. You help them with identifying choices but let them make their own decision."

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CeMHOR web page

(continued from front page)

time our Core Investigators had more visibility, which meant getting us on the worldwide web. We do significant research here. Like everyone else, I'm proud of what we do."

Information on each investigator will be available through the web site (or links) as well as a



"click here" feature to e-mail the investigator. There will also be links to other VA web sites, including the Men-

tal Health QUERI, HSR&D and the South Central VA Health Care Network.

Yvonne plans to pursue work with the VA and continue her career interest in helping veterans. An Air Force veteran herself, she started at CeMHOR as a research assistant to Brenda Booth, PhD. In March 2000 she became a technical writer for CeMHOR.

She points to mentoring by Drs. Booth and Cody as being instrumental "in my ability to conduct a qualitative study and literature review."

Mental Healthcare Report

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Dani Cothorn, BA

Team formed to work toward VA goals

Four VA employees have formed a goal-sharing award team to accomplish several HSR&D goals and, in the process, help the Central Arkansas Veterans Healthcare System meet its goals.

The group could also qualify for gold, silver and bronze awards that translate into \$300, \$200 and \$100 cash awards per team member.

Ralph Suarez, HSR&D administrator and team leader, said the goals pertain to improving customer service and employee development.

Other team members are Rochelle Ott, Shawn Austin and Dani Cothorn.

Yvonne McLaughlin assisted the group but left before the project concludes Sep-

tember 30. Developing a web page for HSR&D is one of the group's goals, and Yvonne led this effort. Plans are for other employees to be trained on the web page computer software.

Employee development will consist of each group member participating in either on-line or hands-on training on computer software for spreadsheets and slide presentations.

The group will also be involved in the VA High Performance Development Model (HPDM), offering opportunities for growth and career development.

"Our goal is to help VISN 16 and the Medical Center meet and even exceed their goals of improved customer service," Ralph says.

The end result will be better educated and trained employees, applying what

they have learned in the work environment, he said.



Kirchner studies depression and alcohol (continued from previous page)

Dr. Kirchner served as Project Director for a study funded by the National Institute on Alcohol Abuse and Alcoholism, with Dr. Brenda Booth, her mentor, as Principal Investigator.

This survey of problem drinkers in six southern states found that current depression in alcohol-dependent adults is associated with increased functional impairment, comorbid drug use, and extent of alcohol problems.

Dr. Kirchner said they also found that survey respondents with past depression were significantly less likely to have health insurance coverage.

As Chair of a VISN 16 Task Force to integrate mental health and primary care

services, Dr. Kirchner led a process that developed specific guidelines for treatment of depression, alcohol and dementia in primary care that were disseminated as VISN policy recommendations for guidelines adherence. She is also an executive committee member of the Mental Health QUERI group based at CeMHOR.

A former post-doctoral fellow at the Centers for Mental Healthcare Research at the University of Arkansas for Medical Sciences, Little Rock, Dr. Kirchner earned the MD degree at UAMS and did a residency in adult psychiatry there. She is certified by the American Board of Psychiatry and Neurology.

Dr. Rapp pursues research on problems of aging Americans

She grew up in North Carolina, in a retirement community of wealthy retirees—elderly people with plenty of money, able to afford the very best lifestyle and healthcare.

Years later when, as a nursing student, Carla Gene Rapp was assigned to her first clinical experience in a nursing home, she called her mother, crying. “I had never seen old people in such bad shape. I just cried and became depressed,” said Dr. Rapp, a registered nurse who eventually earned a doctorate in nursing at the University of Iowa. For the PhD degree, she focused not only on aging but also on cognition and behavioral psychology.

Dr. Rapp is a post-doctoral fellow in the HSR&D CeMHOR, Central Arkansas Veterans Healthcare System.

Not much known then about cognitive impairment

Recalling the nursing home incident, Dr. Rapp said, “Back then, those of us on the staff of the nursing home didn’t know that much about cognitive impairment in the elderly and we were warehousing patients more than treating them. We didn’t know how to intervene with the person walking up and down the hall yelling ‘Mommy, mommy’ or the one who was acting out sexually.”

It was a combination of her upbringing around healthy, well-to-do senior citizens, and the eye-opening experience of what other elderly people face in a long-term nursing facility, that led Dr. Rapp to pursue a career in nursing and research on problems of aging Americans. Since writing her first paper on presenile dementia following her student nursing experience, she has delved into areas of research related to health and aging.



Dr. Rapp and Dr. John Fortney, Director of the VA Fellowship Training Program at the Central Arkansas Veterans Healthcare System

Professor is fellowship mentor

Her fellowship—which includes a salary stipend and money for tuition, books, research and other expenses—has made it possible for her to be mentored by Dr. Cornelia Beck, CeMHOR Principal Investigator, Professor of Geriatrics at UAMS, and nationally noted researcher.

Dr. Rapp was in nursing classes taught by Dr. Beck while studying toward a Master of Nursing Science degree at UAMS, with a clinical specialization in gerontological nursing. As a graduate student, she was also a clinical nurse specialist at Baptist Rehab Institute in Little Rock, doing research for her master’s thesis and working with both geriatric patients and people of all ages who suffered head and brain injuries.

She said the opportunities for learning made available through her fellowship led her last year to change the focus of her career path and research. Reviewing research on dementia in both veterans and non-veterans, she discovered a new interest: behavioral and pharmacological interventions for agitation, aggression and violence in patients with dementia.

She will work with a group through the VISN 16 Mental Illness Research Education Clinical Center (MIRECC) on a project to use input of nursing home providers in studying determinants of disruptive behaviors and then developing assessment and treatment algorithms to train providers.

Dr. Rapp hopes to start data collection this summer for another project describing characteristics of behavior that nursing assistants label as disruptive behavior. She is interested in the decision-making process from the beginning of the behavioral event to the use of an intervention, and how both behavioral and pharmacological interventions are applied in the actual nursing home setting.

Research activities

As a research fellow with CeMHOR, Dr. Rapp has been involved with these research projects:

- ♦ Helping with data collection on the Partnership Approach Grant under Dr. Beck that is attempting to change the culture in nursing homes to be more patient-centered.
- ♦ Serving on the Advisory Committee of the Medicaid Medication Management Project under Dr. Marisue Cody, supported by Arkansas Medicaid, that provides a consultation service on psychiatric and behavioral problems of nursing home residents. Dr. Rapp was instrumental in developing educational materials for the project—including guidelines for use of behavioral interventions—for a provider tool kit.
- ♦ Assisting a coalition of agencies with a proposal, funded by the Administration on Aging, for a three-year \$1 million grant to support new or enhanced services for Alzheimer’s patients in Arkansas.

Before her fellowship ends later this year, Dr. Rapp hopes to apply for a Career Development Award through the National Institutes of Health to fund her

Fellowship program trains mental health researchers

Training mental health researchers is the purpose of the post-doctoral program, which makes two kinds of fellowships available: one with the VA HSR&D Center for Mental Healthcare and Outcomes Research and the other with the NIMH Center for Mental Health Services Research.

John Fortney, PhD, is Director of the VA Fellowship Training Program and Associate Director of the NIMH Fellowship Program. Fellows may interact with other institutions, including the University of Arkansas for Medical Sciences and the University of Arkansas at Little Rock.

The program prepares fellows for grant writing, data collection and analysis, and publication. A fellow is expected to develop and carry out a research project in a clinical or research area. A faculty mentor

oversees the research. A fellowship is for one year, with funding possible for a second year.

Clinical areas

- ♦ Dementia
- ♦ Depressive disorders
- ♦ Substance abuse disorders
- ♦ Schizophrenia
- ♦ Comorbidity

Research themes

- ♦ Access/utilization
- ♦ Outcomes
- ♦ Cost-effectiveness

Support

- ♦ \$37,000 annual stipend
- ♦ \$8,000 supplemental funding for research, education and travel
- ♦ PC and mainframe computer
- ♦ Research assistant and data management/programming support

Eligibility requirements

- ♦ U.S. citizenship or admitted for permanent residence in the U.S.
- ♦ PhD applicants must have completed a doctoral program in a relevant field
- ♦ MD applicants must have completed a residency training program

Materials to be submitted

- ♦ Current curriculum vitae
- ♦ Brief overview of the applicant's areas of research interest, fellowship objectives and career goals
- ♦ Three letters of recommendation

For more information

- ♦ Visit the post-doctoral fellowship program website at:

www.uams.edu/cmhrpostdoc/

- ♦ E-mail Dr. Fortney at:

FortneyJohnC@uams.edu

research on why interventions don't always work "in the real world." She also plans to study more psychopharmacology; health care delivery systems; decision-making theory and the organizational culture, including factors (biases and misinformation) that influence them; and other causes of intervention failure.

Her summer plans included a week in June studying geriatric nursing and research at New York University as a fellow at the Hartford Foundation Institute for Geriatric Nursing. Dr. Beck was on the faculty for the summer program.

"Being associated with the Center group of researchers at the VA has allowed me to find other opportunities and training," Dr. Rapp said. She traveled to St. Louis in the spring to speak on acute

Opportunities for learning made available through her fellowship led Dr. Rapp to change the focus of her career path and research. Reviewing research on dementia in both veterans and non-veterans, she discovered a new interest: behavioral and pharmacological interventions for agitation, aggression and violence in patients with dementia.

confusion and delirium at a national satellite teleconference sponsored by the VA.

As a nurse and researcher, Dr. Rapp said she sees an ever-present need for interdisciplinary study. "That's why I chose the fellowship here (at the Center)," she said. "I was impressed with the interdisciplinary nature of the research group, and the respect they show for nurses and the nursing profession as part of a team. Nurses tend to be somewhat insular and

perhaps not do as much interdisciplinary work as other professionals."

The post-doctoral fellowship and working with different disciplines have given her a more global perspective on her research interests, Dr. Rapp noted.

"I tend to be pretty clinical, and having input from different disciplines helps me develop a more balanced approach to the research areas I want to pursue."

Translation project focuses on quality improvement, clinical prescribing practices

Improving treatment outcomes for veterans with schizophrenia is the major objective of the Mental Health QUERI (MHQ) Schizophrenia Translation Project, which is moving full steam ahead in its implementation phase. There are four translation sites; four matched facilities serve as comparison sites.

Led by Richard R. Owen, MD, the project aims to improve outcomes by educating and training VA treating physicians about best practices for antipsychotic treatment. One such best practice is use of newer antipsychotic medications ("novel" or "atypical" drugs) either as first-line therapy or at least when patients don't respond to conventional antipsychotics. Another is use of moderate doses of these drugs, Dr. Owen said.

Fewer side effects from novels

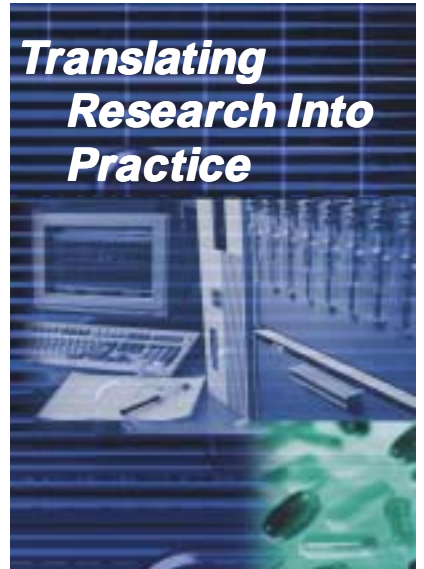
"Research shows that novel antipsychotics have fewer side effects than older, traditional medications prescribed for schizophrenia," he noted. "Equally important is the fact that patients receiving the medications report significant improvement in quality of life."

Whether physicians prescribe medications in correct dosages will have an impact on outcomes, Dr. Owen said. Presently, prescribing practices for patients with schizophrenia vary significantly among VA medical centers and physicians, a finding that gave impetus to the translation project.

The translation project addresses this issue through a pilot study in the South Central VA Health Care Network to determine the most effective way to educate and remind physicians to use evidence-based prescribing practices. The study is also determining which interventions are the most effective in improving how physicians prescribe.

Members of the project implementation team, besides Dr. Owen, are Teresa Hudson, PharmD, Geoff Curran, PhD, and Greer Sullivan, MD, MSPH, Co-Investigators; Dale Chadwick, MBA, Project Director; Mona Ritchie, LCSW, Program Coordinator; Lisa Geisselbrecht, Project Coordinator; Mark Austen, MS, Statistical Programmer; and Sonja Young, Administrative Coordinator.

Information learned from the translation project will be adapted and applied to other VA networks throughout the country.



Project Director: Translation project doesn't seek to force change, rather to communicate and educate

Before joining the VA and the MHQ Translation Project as Project Director, Dale Chadwick was an administrator of mental health and substance abuse facilities in the public and private sectors, and a consultant specializing in behavioral health managed care.

"In the private sector and with managed care," Ms. Chadwick said, "incentives to change practice patterns are meant to be based on improved patient care, but one within a framework, and—some would say—emphasis on, short-term cost savings.

"In those cases, physician practices tend to be mandated by what the payers recommend or, in fact, what they will pay for. Incentives and disincentives are rigorous, and financial disincentives are not uncommon," Ms. Chadwick said.

"What is unique about this project," she continued, "is that we use an evidence-based education model, offering assistance and learning tools, and providing custom-tailored interventions at each site in order to improve clinical practice. Instead of trying to 'force' changes in practice patterns, we are learning to commu-

nicate effectively and work with clinicians so they will want to change for the right reasons, on their own terms."

The translation project team believes the results will be longer lasting. The translation plan also calls for educating patients and their families about newer antipsychotic medications so they can become more knowledgeable about, and involved in, their treatment.

"This is a project designed to educate, empower and show respect for clinicians, researchers, pharmacists and veterans," Ms. Chadwick said.

"There are many ways to influence change. We are literally translating research into practice by educating and empowering clinicians and patients with the latest research."

In today's health care environment, cost has to play a role in treatment, she said. The newer medications are more expensive, pill for pill, than the older generation antipsychotics. However, Dr. Teresa Hudson, Co-Investigator, reviewed the literature on cost studies and found most studies indicated that novel anti-psychotics, when compared to traditional antipsychotic medi-

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PUBLICATIONS

- **Fortney, J.,** Rost, K., Zhang, M., & **Pyne, J.M.** (2001). The relationship between quality and outcomes in routine depression care. *Psychiatric Services*, 52(1), 56-62.
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- **Roland, P., Russell, J., Richards, K.C., & Sullivan, S.C.** (2001) Visitation in critical

care: processes and outcomes of a performance improvement initiative. *Journal of Nursing Care Quality* 15(2):18-26.

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- **Robbins, J.M.,** Taylor, J.L., Rost, K.M., Burns, B.J., Phillips, S.D., Burnam, M.A., & **Smith, G.R.** (2001). Measuring outcomes of care for adolescents with emotional and behavioral problems. *Journal of the American Academy of Child & Adolescent Psychiatry* 40(3), 315-324.
- **Sullivan, G.,** Young, A.S., Fortney, S., Tillipman, D., Murata, D., & Koegel, P. (2001). Managed care in the public sector: Lessons learned from the Los Angeles PARTNERS program. *Journal of Behavioral Health Services & Research* 28(2):155-63.

PRESENTATIONS

VA HSR&D 19th Annual Meeting, Washington, DC, February 2001:

- **Sadler, A., Booth, B.,** Cook, B., Doebbeling, B., "Repeated Violence against Women During Military Service: Effects on Health Status and Outpatient Medical Utilization."

- **Fischer, E., & Shumway, M.,** "Stakeholder Preferences in Schizophrenia: Agreement Within Consumer-Provider-Family Sets."

- **Pyne, J.M., Sullivan, G.,** Kaplan, R.M., & Williams, D.K. "Comparison of Generic Effectiveness Measures in Veterans with Schizophrenia" - Poster presentation.

Symposium on Measuring Mental Health Services, Annual Research Conference of The Research and Training Center for Children's Mental Health, Tampa, FL, February 2001:

- **Kramer, T.L.,** Miller, T.L., Robbins, J.M., Phillips, S.D., & Burns, B.J. "Assessing Quality of Behavioral Health Care for Children and Adolescents."
- **Robbins, J.M.,** Phillips, S.D., **Kramer, T.L.,** Hargis, M.B., & Miller, T.L. "Measuring Service Use in Observational Studies of Adolescent Mental Health Care."

American Psychiatric Association Annual Meeting, New Orleans, LA, May 2001:

- **Owen, R.R.,** "Closing the Efficacy/Effectiveness Gap in Psychopharmacology: Strategies for Implementing Schizophrenia Guidelines."
- **Pyne, J.M., Sullivan, G., & Williams, D.K.** "Quality-adjusted Life Year Measurement in Persons with Schizophrenia" - Oral presentation, Symposium on Quality of Life in Patients with Schizophrenia: Research in France and North America.
- **Sullivan, G.,** "Seriously Mentally Ill Adults Who Are HIV Positive" and "Policies Regarding Novel Antipsychotic Medications."

Mental Health QUERI Translation Project Sites

▶ Alexandria, Louisiana
VAMC
Sidney Badeux, MD
Site Investigator

▶ Biloxi, Mississippi
Gulfcoast Veterans Healthcare System
Dan Dansak, MD
Site Investigator
Wade A. Crowder, MD
Randal Caffarel, MD
Translation Leaders

▶ Houston, Texas
Houston VAMC
Joseph DeVance Hamilton, MD
Site Investigator
Robin Hurley, MD
Jennie Hall, MD
Translation Leaders

▶ Jackson, Mississippi
G.V. Sonny Montgomery VAMC
Henry Nasrallah, MD
Site Investigator

▶ New Orleans, Louisiana
VAMC
Lee Tynes, MD, PhD
Site Investigator
Matthew Fogarty, MD
Craig Maumas, MD
Translation Leaders

▶ Oklahoma City, Oklahoma
VAMC
Walter T. Traxler, MD
Site Investigator
Barbara Masters, MD
Pai Mangalore, MD
Translation Leaders

▶ Shreveport, Louisiana
Overton Brooks VAMC
Dean Robinson, MD
Site Investigator

▶ Little Rock, Arkansas
Central Arkansas VHS
Richard R. Owen, MD
Principal Investigator
Geoffrey M. Curran, PhD
Associate Director
Dale Chadwick, MBA
Translation Project Director



QUERI Translation Project

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cations, are either cost-neutral and/or have the potential to offer cost advantages, particularly in treatment of acute stages of schizophrenia.

"Unlike the private sector, which is forced by market pressures to worry about short-term, bottom-line time frames," Ms. Chadwick said, "we are in a system that is driven by long-term cost-benefit analyses.

"The expectation is that improved practice patterns will result in fewer hospital readmissions and new admissions. Another expectation is that veterans will be able to manage their illness, return to work and maximize their potential in every aspect of their lives."

She added, "Proper utilization of technology, combined with the VA's emphasis on intensive case management in the community, is a terrific combination for improving the quality of life for veterans living with schizophrenia."

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FROM THE DIRECTOR

Highlighting CeMHOR research and training *(continued from front page)*

After completing a VA Research Career Development Award, JoAnn this year received an Advanced Research Career Development Award. The award allows her to continue her research on alcohol disorders and depression, particularly their detection, diagnosis and treatment in VA primary care settings.

Carla is a VA post-doctoral fellow at CeMHOR whose career plan includes the study of geriatric psychopharmacology, health care delivery systems, decision-making theory and organizational culture. She first heard of CeMHOR in nursing classes taught by Core Investigator Cornelia Beck, PhD, at the University of Arkansas for Medical Sciences (UAMS).

Training and recruitment

Our successful post-doctoral fellowship program to train researchers in mental health services now includes a fellowship for physicians as well as fellows from other disciplines. Although this program is not VA-funded, our faculty supervise the fellows, and the fellows often perform VA-relevant health services research.

Another point of pride is the fact that CeMHOR leads the nation in mentoring psychiatrists. Three psychiatrists who have received HSR&D Research Career Development Awards are based in Little Rock,

and Center investigators give their support as mentors or reviewers to several career development award recipients outside the group who study mental health services and outcomes.

Collaboration and mentoring

Strategically, we are in an excellent position to collaborate with other mental health services and clinical researchers because of our proximity to and affiliation with three entities: the Mental Health Quality Enhancement Research Initiative (QUERI) Coordinating Center, the South Central Mental Illness Research, Education, and Clinical Center (MIRECC) and the NIMH Center for Mental Health Services Research at UAMS.

CeMHOR's collaborations often result in multicenter, multisite projects, ensuring that the expertise of Core Investigators and fellows is made available to other investigators.



Initiatives

Specifically, our strategic plan outlines the following initiatives to help us reach our goal of increasing the capacity of mental health services research:

- ♦ We will continue to recruit and train talented post-doctoral fellows in VA-relevant research
- ♦ We will continue to mentor talented researchers, including HSR&D Research Career Development Award recipients
- ♦ We will continue current work and develop new collaborations with researchers nationally to enhance and expand VA-relevant research

More work to be done

I believe there is more work to be done in mental health services research and quality enhancement than there are researchers trained in these areas.

Since I started in this field eight years ago, CeMHOR has made great strides in recruiting and training promising investigators who seek to improve the mental health care and outcomes of our nation's veterans.

But these are challenging tasks, and we must work tirelessly to expand our capacity to do this important work.